Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation sules of stability as wall of Mod or the Conduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays availed Okles Order to provide the Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays availed Okles Order to provide the Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays availed Okles Order to Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays availed Okles Order to Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays availed Okles Order to Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays availed Okles Order to Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays and Okles Order to Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays availed Okles Order to Paperwork Reduction Act of 1995, no person are required to respond to a collection of biformation unless tideplays and the Paperwork Reduction Act of 1995, no person are required to respond to the Paperwork Reduction Act of 1995, no person are required to respond to the Paperwork Reduction Act of 1995, no person are required to respond to the Paperwork Reduction Act of 1995, no person are required to the Paperwork Reduction Act of 1995, no person are required to respond to the Paperwork Reduction Act of 1995, no person are required to the Paperwork Reduction Act of 1995, no person are required to respond to the Paperwork Reduction Act of 1995, no person are required to the Paperwork Reduction Act of 1995, no person are required to the Paperwork Reduction Act of 1995, no p

FEE TRANSMITTAL FOR Y 2009    Applicant claims a mail entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT   (8) 245.00   Attorney Docket No.   0184-0164PUS1    METHOD OF PAYMENT   (8) 245.00   Attorney Docket No.   0184-0164PUS1    METHOD OF PAYMENT (check all that apply)   Check   Credit Card   Money Order   None   Other (please identity):	Effective		Complete if Known						
FIGURE FOR FY 2009    X   Applicant claims small entity status. See 37 CFR 1.27   Art Unit   3616   Ar	Fees pursuant to the Consolidat	Application N	The state of the s						
Examiner Name D. J. Brown  At Unit 3616  TOTAL AMOUNT OF PAYMENT (8) 245.00 Altomey Docket No. 0184-0164PUS1  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Name: Birth, Stewart, Kolasch & Birch, LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  A Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  Small Entity  Application Type Fee(s)	FEE TRA	Filing Date							
Examiler Name   D. J. Brown	For								
TOTAL AMOUNT OF PAYMENT (s) 245.00   Altomorp Docket No.   O184-0164PUS1		Examiner Nan							
METHOD OF PAYMENT (check all that apply)  Check	X Applicant claims small entity status. See 37 CFR 1.27			Art Unit					
Check Credit Card Money Order None Other (please identify):    Deposit Account Deposit Account Name: Birth, Stewart, Kolasch & Birch, LLP   For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   X Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee		Attorney Dock	Attorney Docket No. 0184-0164PUS1						
X   Deposit Account   Deposit Account Number   Deposit Account Number   Deposit	METHOD OF PAYMEN	T (check al	l that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee charge fee(s) indicated below, except for the filing fee seed (s) indicated below, except for the filing fee seed (s) indicated below, except for the filing fee charge fee (s) indicated below, except for the filing fee seed (s) indicated below, except for the filing fee seed (s) indicated below, except fee(s) indicated be									
Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below, except for the filing fee   Charge fee(s)   Charge fee(s)   Escal filing the per   Charge fee(s)   Escal filing fee   Charge fee(s)   Esca								nicii, EEF	
Credit any overpayments   Credit any overp									
FEE CALCULATION	x Charge any additional fee(s) or underpayments of								
SEARCH FEES   Small Entity   Fee (\$)   Fee (									
Application Type									
Utility   330   165   540   270   220   110	Small Entity Small Entity Small Entity								
Design							Fees Pa	aid (\$)	
Plant	•								
Reissue									
Provisional   220   110   0   0   0   0   0   0   0   0									
2. EXCESS CLAIM FEES  Fee Discription  Fee Discription  Fee Claim									
Fee Description Each claim over 20 (including Reissues) Each claim over 20 (including Reissues) Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues)  ### Part	2. EXCESS CLAIM FEES					•	s	mall Entity	
Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  9 - 20 or HP  Extra Claims 9 - 20 or HP  Extra Claims 9 - 20 or HP  Extra Claims 10 or HP  Extra Cla	Fee Description Fee (\$) Fee (\$)								
Multiple dependent claims  Total Claims 9 - 20 or HP  **Registra Claims   Fee (\$)   Fee Paid (\$)    **HP = highest number of total claims paid for, if greater than 20.  Indep. Claims 2 - 3 or HP =   Fee Paid (\$)    **HP = highest number of total claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.5(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheats  -100 =   Foe Paid (\$)    **Number of leach additional 50 or fraction thereof received by the particular of	with a second control of the second control								
9 -20 or HP = Injhest number of total claims paid for. If greater than 20.  HP = Injhest number of total claims paid for. If greater than 20.  10 or HP = Injhest number of total claims paid for. If greater than 20.  HP = Note that number of the Injhest paid for. If greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.75(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(C) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof fee (5) Fee Paid (5)  -100 = //50 = (found up to a whole number) x  Fees Paid (5)  OTHER FEE(S)  Fee Paid (5)  F									
HP = highest number of total claims paid for. If greater than 20.  Indep. Claims  Extra Claims  Fee (8)  Fee Paid (\$)  2	Total Claims Extr	Fee Paid (\$)	M	lultiple Depend	ent Claims				
Indep. Claims  Z -3 or HP = A or HP	x = Fee (5) Fee Paid (5)								
2									
APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e), the application size fee due is \$270 (\$115 for small entity) for each additional 50 sheets or fraction thereof. See \$5 U.S.C. 41(a)(1)(0) and 37 CFR 1.16(s).  Intelligence of the start Sheets									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.5(e), the application size fee due is \$270 (§135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).  Total Sheets  -100 =	HP = highest number of independent claims paid for, if greater than 3.								
4. OTHER FEE(s)  Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2251 Extension for response within first month 1806 Submission of an Information Disclosure Statement  Submitted BY Registration No. 28,380 Telephone (703) 205-8015	listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
A OTHER FEE(S)   Fees Paid (\$)									
Other (e.g., late filing surcharge): 2251 Extension for response within first month 65.00 1806 Submission of an Information Disclosure Statement 180.00 SUBMITTED BY Registration No. 28,380 Telephone (703) 205-8015	4. OTHER FEE(S) Fees Paid (\$)								
SUBMITTED BY Registration No. Registration No. 28,380 Telephone (703) 205-8015	Other (a.e. lete 5line sweeters). 2251 Extension for response within first month								
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Registration No. (Attorney/Agent) 28,380 Telephone (703) 205-8015	SUBMITTED BY /	<del></del>	.1						
£ 1	Signature Con-	<u> </u>	Catten	Registration No. (Attorney/Agent)	28,380	Telephone	(703) 205-	-8015	